

IN THE UNITED STATES DISTRICT COURT FOR THE  
DISTRICT OF MASSACHUSETTS

CHRISTOPHER PAUL CONLIN )

Plaintiff, )

V. )

EQUIFAX CORPORATION )

EXPERIAN CORPORATION )

TRANS UNION CORPORATION )

Defendants. )

Civil Action No.

COMPLAINT

Parties

- 1.) The Plaintiff is a resident of Fitchburg, Northern Worcester County, Massachusetts and a citizen of the United States.
- 2.) The Defendant Equifax Corporation is a business in Atlanta, Georgia and a Corporation in the United States.
- 3.) The Defendant Experian Corporation is a business in Allen, Texas and a Corporation in the United States.
- 4) The Defendant Trans Union Corporation is a business in Chester, Pennsylvania and a Corporation in the United States.

(2)

### Jurisdiction

5.) This court has jurisdiction over this matter pursuant to 28 U.S.C 1332.

### Facts

6.) On August 2nd 1996 the Plaintiff payed the IRS a sum of six thousand four hundred and twenty one dollars (\$6,421.00). Finally after a very long period of waiting the Plaintiff received a "Certificate of Release," marked exhibit (A), IRS Form 668 (Z) titled "Certificate of Release of Federal Tax Lien." This release showing the tax lien has been payed in full, on "02nd day of August 1996!"

7.) The Plaintiff was certain once he payed his federal tax lien the derogatory information pertaining to this tax lien would be removed from his credit report. Some years later in fact in two thousand four the Plaintiff applied for a credit card and was refused credit. The Plaintiff then checked his credit report and found a multitude in fact a myriad of incorrect and derogatory information including the "**Payed Tax Lien**" on his credit report with the above captioned Defendants. The Plaintiff now lists in count 8 the following factual incorrect credit data!

(3)

8.) The Plaintiff states that at no time has he ever been aware of or had the following: credit accounts, creditors or credit lines with the following

companies: 1.) **Cross Country Banks INC** # 4227 0970 9390,

2.) **VZW NE** # 10227064000000 3.) **AM COLL SYS** # 1146771

4.) **COLLECTION** # 132983556 5.) **RCN** # 13070050

6.) **CROSS COUNTRY BANKS INC** # 4227 0970 9325

7.) **WFFINANCIAL** # 107100104633699.

9.) The Plaintiff tried calling the Defendants on the phone which produced no results. Then Plaintiff then tried sending the Tax Release Certificate to the Defendants along with inquiries as to the other above mentioned credit issues. The Plaintiff now draws the courts attention to Exhibits: **A, 1, 2, 3, 4, 5, and 6** to substantiate the above referenced issues. The Plaintiff has repeatedly tried to solve the problem on his own! All to no avail!

10.) The Plaintiff Finally certifies in count ten that his credit report is permanently damaged and that the Defendants behavior in this matter has been: unfair, arbitrary, and capricious. In fact the above captioned Defendants have never sent the Plaintiff a copy of his credit report nor his credit score!

(4)

The Plaintiff states he is a disabled Veteran and his reputation and good credit is now tarnished! The Plaintiff is committed to working with the Defendants in having the above mentioned credit issues permanently **"EXPUNGED"** from his credit report, and to receive his updated credit score! Wherefore the Plaintiff asks this court to award him **"ONE MILLION DOLLARS"** ( \$ 1000000.00) in damages and to order the Defendants Equifax, Experian and Trans Union Corporations to permanently **"EXPUNGE"** all derogatory information from his credit report and any other relief this court may deem proper and just and to be allowed to produce any new evidence, state judgements or material in relation to the above captioned matter! Trial by jury is requested.

Respectfully Submitted

Christopher Paul Conlin  
3 Lynn Street Apartment 2/F  
Fitchburg, Massachusetts 01420  
Phone & Fax (978)-343-3945



EXHIBIT # 1

Experian Consumer Relations  
PO Box 2002  
Allen, TX 75013  
1-888-397-3742

July 31, 2004

Christopher Paul Conlin File No. 087-50-4686  
3 Lynn Street  
Fitchburg, Massachusetts 01420  
Cell phone (603) 520-2367  
E-mailchrcnl5@aol.com

NOTICE OF DEMAND

FINAL NOTICE

Dear Sir:

Please be advised I have currently filed a lawsuit In United States District Court against EXPERIAN for improperly reporting derogatory information on my credit report. Further I am seeking damages up to and including one million dollars.

This letter serves to advise you of this action. You will be served by the United States Marshall Service Shortly. I am open to any settlement proposals you may wish to offer at this time. Thank you for your attention in this matter.

The IRS Release Of Lien Certification is enclosed for your records. In other words I want you to remove this and all the other items I have marked off on the enclosed credit report immediately. Please note the items I have checked off are not me. Further Statute of Limitations applies to entries VZW NE # 10227064000000 and AM COLL SYS #11146771 HR BLOCK QUINCY, MASS.

(2)

Sincerely  
*Christopher Paul Conlin*  
Christopher Paul Conlin

RETURN RECEIPT # 7004 0550 0000 5021 6753 EXHIBIT MARKED D

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: <b>1-888-397-3742</b></p> <p><b>Experian Corporation</b>  <b>PO Box 2002</b>  <b>ALLEN, TEXAS</b>  <b>75013-0036</b></p>		<p>A. Signature: <b>[Signature]</b> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name): <b>K. Espinoza</b> C. Date of Delivery: <b>ONE 8/11/04</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No          If YES, enter delivery address below: <b>must be Legally SIGNED &amp; DATED</b></p>	
<p>2. Article Number (Transfer from service label): <b>7004 0550 0000 5021 6753</b></p>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>PS Form 3811, February 2004</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Domestic Return Receipt 102595-02-M</p>	

U.S. Postal Service™	
<b>CERTIFIED MAIL™ RECEIPT</b>	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Postage	\$ 0.83
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.88
<p>Sent To: <b>Experian Corporation</b></p> <p>Street, Apt. No., or PO Box No.: <b>PO Box 2002</b></p> <p>City, State, ZIP+4: <b>Allen Texas 75013-0036</b></p>	
<p>PS Form 3800, June 2002 See Reverse for Instructions</p>	



EXHIBIT # 2

Experian Consumer Relations  
PO Box 2002  
Allen, TX 75013  
1-888-397-3742

July 31, 2004

Christopher Paul Conlin File No. 087-50-4686  
3 Lynn Street  
Fitchburg, Massachusetts 01420  
Cell phone (603) 520-2367  
E-mailchrcnl5@aol.com

NOTICE OF DEMAND

Dear Sir:

Please be advised I have currently filed a lawsuit In United States District Court against Trans-Union for improperly reporting derogatory information on my credit report. Further I am seeking damages up to and including one million dollars.

This letter serves to advise you of this action. You will be served by the United States Marshall Service Shortly. I am open to any settlement proposals you may wish to offer at this time. Thank you for your attention in this matter.

The IRS Release Of Lien Certification is enclosed for your records. In other words I want you to remove this and all the other items I have marked off on the enclosed credit report immediately.

Sincerely

*Christopher Paul Conlin*  
Christopher Paul Conlin

RETURN RECEIPT # 7004 0550 0000 5019 3979 EXHIBIT MARKED C

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to

1858 397 3742  
 EXPERIAN Consumer Relations  
 PO Box 2002  
 ALLEN, TX 75013

A. Signature

X

☐ Agent☐ Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7004 0550 0000 5019 3979

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

ALLEN, TX 75013

Postage

\$ 0.60

UNIT ID: 0420

Certified Fee

2.30

Return Receipt Fee

(Endorsement Required)

1.75

Restricted Delivery Fee

(Endorsement Required)

Total Postage &amp; Fees

\$ 4.65

Postmark

Here

Clerk: KJTB24

503/02/04

Sent To:

EXPERIAN Consumer Relations

Street, Apt. No.

or PO Box No.

City, State, ZIP+

ALLEN, TX 75013

PS Form 3800, June 2002

See Reverse for Instructions

Trans Union Consumer Relations  
PO Box 1000  
Chester, PA 19022  
Ph 1 800 888-4213

July 31, 2004

Christopher Paul Conlin File No. 087-50-4686  
3 Lynn Street  
Fitchburg, Massachusetts 01420  
Cell phone (603) 520-2367  
E-mailchrcnl5@aol.com

NOTICE OF DEMAND

Dear Sir:

Please be advised I have currently filed a lawsuit In United States District Court against Trans-Union for improperly reporting derogatory information on my credit report. Further I am seeking damages up to and including one million dollars.

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Sincerely

  
Christopher Paul Conlin

RETURN RECEIPT # 7004 0550 0000 5020 7782 EXHIBIT MARKED A

7004 0550 0000 5020 7782

7004 0550 0000 5020 7782

**OFFICIAL USE**

CROSS LANE, PA 19022

Postage \$ 0.60 UNIT ID: 0420

<b>Certified Fee</b>	
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2.30

Return Receipt Fee (Endorsement Required)	1.75
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**Restricted Delivery Fee**  
(Endorsement Required)

**Total Postage & Fees** \$ 4.65

UNIT ID: 0420

Postmark  
Here

Clerk: KSTB

08-0720

Sent To: \_\_\_\_\_

TRANS UNION (C) 1987 BY REITS

Street, Apt. No.,  
or PO Box No. PO Box 10000

City, State, ZIP+4 Chester PA 19022

PS Form 3800, June 2002

See Reverse for Instructions

EXHIBIT # 4

Equifax Consumer Relations  
PO Box 740241  
Atlanta, GA 30374  
1- 800-685-1111

July 31, 2004

Christopher Paul Conlin File No. 087-50-4686  
3 Lynn Street  
Fitchburg, Massachusetts 01420  
Cell phone (603) 520-2367  
E-mailchrcnl5@aol.com

NOTICE OF DEMAND

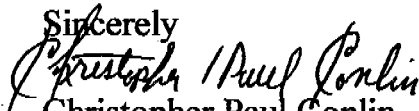
Dear Sir:

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The IRS Release Of Lien Certification is enclosed for your records. In other words I want you to remove this and all the other items I have marked off on the enclosed credit report immediately.

Sincerely

  
Christopher Paul Conlin

RETURN RECEIPT # 7004 0550 0000 5020 7812 EXHIBIT MARKED B

1. Complete this section if you are sending a letter or card.  
 2. Complete this section if you are sending a package.  
 3. Complete this section if you are sending a letter or card.  
 4. Complete this section if you are sending a package.  
 5. Complete this section if you are sending a letter or card.  
 6. Complete this section if you are sending a package.  
 7. Complete this section if you are sending a letter or card.  
 8. Complete this section if you are sending a package.  
 9. Complete this section if you are sending a letter or card.  
 10. Complete this section if you are sending a package.

*Equifax Consumer Relations*  
*PO Box 740291*  
*Atlanta, GA 30374*

7004 0550 0000 5020 7812

1. Complete this section if you are sending a letter or card.  
 2. Complete this section if you are sending a package.  
 3. Complete this section if you are sending a letter or card.  
 4. Complete this section if you are sending a package.  
 5. Complete this section if you are sending a letter or card.  
 6. Complete this section if you are sending a package.  
 7. Complete this section if you are sending a letter or card.  
 8. Complete this section if you are sending a package.  
 9. Complete this section if you are sending a letter or card.  
 10. Complete this section if you are sending a package.

7004 0550 0000 5020 7812

7004 0550 0000 5020 7812

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

ATLANTA, GA 30374

Postage \$ 0.60

Certified Fee 2.30

Return Receipt Fee (Endorsement Required) 1.75

Restricted Delivery Fee (Endorsement Required)

Total Postage &amp; Fees \$ 4.65

UNIT ID 0420

Postmark

Date: 08/07/04

Signature: KJT/SA

Sent To

Equifax Consumer Relations

Street, Apt. No. or PO Box No.

City, State, ZIP+4

Atlanta GA 30374

PS Form 3800, June 2002

See Reverse for Instructions

Collection  
30 Massachusetts Avenue  
North Andover, Massachusetts 01845

August 8, 2004

Christopher Paul Conlin File No. 087-50-4686  
3 Lynn Street  
Fitchburg, Massachusetts 01420  
Cell Phone 603-520-2367  
Phone 978 343-7550  
E-mail chrnl5@aol.com


Dear Sir:

Please be advised that Dr. Lecerf was paid off over two years ago. Further I am including her phone number as 508-872-0110. Enclosed is a copy of my credit report. I strongly urge you to please remove this debt from my credit report effective immediately!

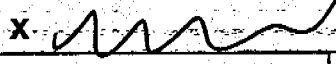
I would like to have you send me a release letter today! I plan to take legal action against you and to have you pay court costs and legal fees if this matter is not resolved by Tuesday at the latest. Thank you for your attention in this matter you may reach me at 978-343- 7550 or by cell phone at 603-520-2367.

I am willing to work with you to resolve this matter. This bill was paid a long time ago.

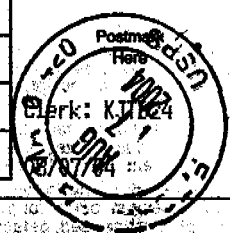
Sincerely

  
Christopher Paul Conlin

978-682-3023 TERRY KING  
RETURN RECEIPT # 7004 0550 0000 5016 8526

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>X </p>	
<p>1. Article Address</p> <p>978-682-3023</p> <p>Collection 30 MASSACHUSETTS AVE NORTH ANDOVER, MA 01845</p>		<p>B. Received by (Printed Name) C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7004 0550 0000 5016 8526</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15

U.S. Postal Service™	
<b>CERTIFIED MAIL™ RECEIPT</b>	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
NORTH ANDOVER, MA 01845	
Postage	\$ 0.37
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.42
UNIT ID: 0420	
	
<p>Sent by <u>Collection</u></p> <p>Street, Apt. No., or PO Box No. <u>30 Massachusetts Ave</u></p> <p>City, State, ZIP+4 <u>NORTH ANDOVER, MA 01845</u></p>	
PS Form 3800, June 2002 See Reverse for Instructions	



CHRISTOPHER PAUL CONLIN  
5 RIVERDALE RD  
WELLESLEY, MA 02181

EXHIBIT (6)

SSN: 087504686  
YEAR OF BIRTH: 1958

### Reinvestigation Request

We will investigate any item you believe is inaccurate. Just a reminder, a credit report is a history of how accounts were paid; therefore, even a paid collection would not be deleted. Missed payments and most public record items remain on the credit report for seven years, except Chapter 7, 11 and 12 bankruptcies which remain for 10 years.

You may complete this form and mail it to the following address:

EXPERIAN, P O BOX 2106, ALLEN, TX 75013-2106

For faster service, please call us at 800.422.4879  
Monday through Friday from 7:30 a.m. to 7 p.m. Central Standard Time.

We will contact the source of the information you questioned. When we complete our reinvestigation process we will send you an updated credit report. You will hear from us again within 30 days of receipt of your request. For us to reinvestigate an item, we need all of the following information:

Social Security Number: 087-50-4686

Company Name: N R BLOCK

Account #:

☒ Not my account U2W ☐ Never paid late

☐ Included in bankruptcy ☒ Paid in full

Other: (please explain) RECEIPT ENCLOSED

Company Name: Cross Country Bank

Account #:

☐ Not my account

☐ Never paid late

☐ Included in bankruptcy

☐ Paid in full

Other: (please explain)

EXPERIAN PLEASE REMOVE THESE FROM

MY CREDIT REPORT PLEASE SEE ENCLOSED

AND ORIGINAL PAYED RECEIPTS

Company Name: WE FINANCIAL

Account #:

☐ Not my account

☐ Never paid late

☐ Included in bankruptcy

☒ Paid in full

Other: (please explain)

Company Name:

Account #:

☐ Not my account

☐ Never paid late

☐ Included in bankruptcy

☐ Paid in full

Other: (please explain)

1) FEDERAL TAX LIEN PAYED ON 02ND August 1996, 2) N R BLOCK  
WAS PAYED 12/98 UNDER PROTEST NEVER HAD ACCOUNT WITH THEM!

At your request, we will send the results of our reinvestigation to organizations who reviewed the credit report within the past six months (12 months for residents of CO, MD, NY and VT) or to employers who inquired within the past two years. Please indicate your choices.

3) Dr Lecierf WAS PAYED IN 1997 for Dental Work Done  
IN 1996!

Christopher Paul Conlin  
12/2002